



## Illinois Department of Public Health's Centers for Disease Control and Prevention (CDC) Cooperative Agreement for Emergency Response: Public Health Crisis Response (Opioid Crisis CoAg)

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As part of the first Public Health Crisis Response notice of funding opportunity, the Illinois Department of Public Health (IDPH) received a \$3.6 million award from the Centers Disease Control and Prevention (CDC). The Cooperative Agreement for Emergency Response: Public Health Crisis Response (Opioid Crisis CoAg) will support approved program activities for the period of September 1, 2018 – August 31, 2019. The CDC released these funds to states to support the acceleration and enhancement of current and future opioid response activities. IDPH intends to use the funding to support the strategies outlined in the State Opioid Action Plan (SOAP). The following is the list of projects that the Opioid Crisis CoAg will support.

- 1. Increased State and Local Response Capacity:** To combat the ever-growing number of individuals overdosing on opioids in Illinois, it is essential to address the different routes to opioid initiation. IDPH is using the Opioid Crisis CoAg to support this preventative approach focusing on both reducing the number of new initiates to prescription opioid pain relievers and connecting those individuals who misuse opioids to necessary services.
  - Increase the number of prescribers who currently hold DATA (Drug Addiction Treatment Act) waivers and prepare waived providers to appropriately use the prescribing guidelines in their practice through Opioid Stewardship and DATA waiver trainings.
  - Enhance training for First Responders to improve their ability to respond effectively and work with people who use drugs in a non-overdose event.
  - Conduct a jurisdictional-level vulnerability assessment in the most vulnerable areas of Illinois to better understand, prepare for, and reduce opioid overdoses and related transmission of infectious disease.
  
- 2. Strengthened Bio Surveillance:** Data collection, analysis, and sharing are fundamental to identifying opportunities for intervention and mounting targeted and rapid response activities. The Opioid Crisis CoAg supports four activities that enhance data gathering about fatal and non-fatal opioid drug overdoses and street use.
  - Expand the State Unintentional Drug Overdose Reporting System (SUDORS) at Ann & Robert H. Lurie Children's Hospital of Chicago through abstracting data on opioid drug overdose deaths from death certificate and coroner/medical examiner (CME) reports, and supporting CMEs to improve death scene investigations and toxicology screening for suspected opioid-involved overdose cases.
  - Improve completeness and accessibility of prehospital emergency medical services (EMS) data submitted to IDPH by targeting the different system levels that collect/report EMS data.
  - Enhance the 48-hour hospital Emergency Department (ED) reporting of opioid overdoses using syndromic surveillance, initiating naloxone administration reporting, validating reported data, and providing troubleshooting and technical assistance to facilities on reporting.
  - Deploy a fentanyl testing machine capable of performing street-based testing of drug residue to help identify types of opioid drugs, including quantitative results for fentanyl, in the Chicago area in collaboration with Chicago Department of Public Health and local community partners.

- 3. Improved Information Management:** The availability of timely surveillance data and knowledge at the local level is a critical component for immediate actionable, local response efforts. In Illinois, the volume of substance use disorder and overdose are at such epidemic levels that individual-level investigations need to be enhanced by analysis of multiple data streams, and the responses to sudden or significant increases need to be above existing baseline levels. Funding from the Opioid Crisis CoAg supports three activities that will improve communication and response activities between stakeholders, including local health departments, hospitals, IDPH, and the public.
- Develop local response plans for opioid overdose morbidity based on near real-time surveillance.
  - Support bi-directional data collection for surge/outbreak response through existing systems.
  - Integrate data from the Illinois Department of Human Services Division of Substance Use Prevention and Drug Overdose Prevention Program (DOPP) Initiative into Overdose Detection Mapping Application ODMAP, a national, real-time overdose surveillance tool.
- 4. Improved Use of the Prescription Drug Monitoring Program:** The Opioid Crisis CoAg will support the integration of the Illinois Prescription Monitoring Program (PMP) with electronic health records (EHR) in hospitals and health care systems statewide via the PMPNow automated EHR connection system.
- 5. Increased Linkage to Care:** Funding from the Opioid Crisis CoAg will be used to support capacity building at harm reduction organizations statewide to expand their client base and develop more comprehensive linkages to prevention, treatment, and harm reduction services for individuals with opioid use disorder (OUD), encompassing prescription opioids as well as illicit drugs such as heroin.

**Additional information regarding the Opioid Crisis CoAg can be found at <https://www.cdc.gov/cpr/readiness/funding-opioid.htm>.**